



FILED _____ ENTERED _____
 LODGED _____ RECEIVED _____
 JUL 21 2011 RE

Department of the Treasury
Federal Law Enforcement Agencies
PROCESS RECEIPT AND RETURN

AT SEATTLE
 CLERK U.S. DISTRICT COURT
 WESTERN DISTRICT OF WASHINGTON
 BY _____ DEPUTY

PLAINTIFF UNITED STATES OF AMERICA		COURT CASE NUMBER CR06-0466TSZ	
DEFENDANT DAVID R. MENDOZA		TYPE OF PROCESS Record Final Order of Forfeiture	
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE Pierce County Recorder's Office		
	ADDRESS (Street or RFD, Apartment No., City, State and Zip Code)		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		NUMBER OF PROCESS TO BE SERVED IN THIS CASE	
UNITED STATES ATTORNEY'S OFFICE RICHARD E. COHEN, AUSA 700 STEWART STREET, SUITE 5220 SEATTLE, WASHINGTON 98101-1271		NUMBER OF PARTIES TO BE SERVED IN THIS CASE	
		CHECK BOX IF SERVICE IS ON USA	
SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (includes Business and Alternate Addresses, Telephone Numbers, and Estimated Times Available For Service) Please record the attached Final Order of Forfeiture with the Pierce County Recorders Office. Thank you.			
Signature of Attorney or other Originator requesting service on behalf of <i>[Signature]</i> Richard E. Cohen, Assistant U.S. Attorney		PLAINTIFF <input checked="" type="checkbox"/> JPB DEFENDANT	TELEPHONE NO. 206/ 553-2242
			DATE 4/25/11
SIGNATURE AND DATE OF PERSON ACCEPTING PROCESS			
SPACE BELOW FOR USE OF TREASURY LAW ENFORCEMENT AGENCY			
I acknowledge receipt for the total number Of process indicated	District of Origin No. _____	District to Serve No. _____	SIGNATURE OF AUTHORIZED TREASURY AGENCY OFFICER <i>[Signature]</i> SA HSI
			DATE 5/4/2011
I HEREBY CERTIFY AND RETURN THAT I PERSONALLY SERVED, HAVE LEGAL EVIDENCE OF SERVICE, HAVE EXECUTED AS SHOWN IN "REMARKS", THE PROCESS DESCRIBED ON THE INDIVIDUAL, COMPANY, CORPORATION, ETC., AT THE ADDRESS SHOWN ABOVE OR ON THE ADDRESS INSERTED BELOW			
I HEREBY CERTIFY AND RETURN THAT I AM UNABLE TO LOCATE THE INDIVIDUAL, COMPANY, CORPORATION, ETC NAMED ABOVE.			
NAME & TITLE OF INDIVIDUAL SERVED IF NOT SHOWN ABOVE:		A person of suitable age and discretion then residing In the defendant's usual place of abode.	
ADDRESS: (Complete only if different than shown above)		DATE OF SERVICE 5/4/2011	TIME OF SERVICE AM PM 12:49
		SIGNATURE, TITLE AND TREASURY AGENCY <i>[Signature]</i> SA HSI	
REMARKS: 201105040303 Recording Number			

